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MAY 25 2006

CERTIFICATE UF READ FROGRAM DEPARTMENT OF HEALTH

May 24, 2006

Ms. Junis Sigman, Manager Certificate of Need Program Department of Health P.O Box 47851 Olympia, WA 98504-7851

Dear Ms. Sigman:

Maxim Healthcare Services, Inc. is submitting the following as an expression of intent to file an application for a Certificate of Need. This Certificate of Need is to establish a Medicare/Medicaid certified home health agency serving the primary service area of Thurston County.

In our proposed capacity, we envision offering the full range of services which are normally expected of similar providers. Specifically, we would offer the following services:

Skilled Nursing Home Health Aide Social Work Infusion Therapy Physical Therapy Occupational Therapy Speech Therapy

Opening costs are projected to fall within the \$125.00 to \$135.00 per visit range, which is consistent with costs experienced by other providers within the same industry. More definitive cost projections will be provided with our application. Because of space already available to us, we do not anticipate any capitol costs; therefore we do not intend to incur any capital expenditure.

Sincerely,

Robert Krause

General Manager, Olympia Office Maxim Healthcare Services, Inc.





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▲ Dynamic Nursing Pool
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ROBERT KRAUSE

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